

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(703) 746-4000

or **Fax**

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590

12/05/2003

LISA A HAILE
GRAY CARY WARE & FREIDENRICH LLP
4365 EXECUTIVE DRIVE
SUITE 1100
SAN DIEGO, CA 92121



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Aldon Griffis	(Depositor's name)
<i>Aldon Griffis</i>	(Signature)
January 27, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/479,467	01/06/2000	Paul W Sternberg	CIT1520-1	3063

TITLE OF INVENTION: POLYCYSTIC KIDNEY DISEASE GENE HOMOLOGS REQUIRED FOR MALE MATING BEHAVIOR IN NEMATODES AND ASSAYS BASED THEREON

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$0	\$665	03/05/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
PARAS JR, PETER	1632	435-320100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

GRAY CARY WARE & FREIDENRICH, LLP

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

California Institute of Technology Pasadena, California

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☒ Advance Order - # of Copies TWO (2)

4b. Payment of Fee(s):

☒ A check in the amount of the fee(s) is enclosed. \$671.00☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1355 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

Lisa A. Haile
Lisa A. Haile, Reg. 38,347 January 27, 2004

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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02/03/2004 FFANAI3 00000140 09479467

01 FC:2501

665.00 OP

02 FC:8001

6.00 OP

TRANSMIT THIS FORM WITH FEE(S)



PATENT
Attorney Docket No.: CIT1520-1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Sternberg and Barr
Application No.: 09/479,467
Filed: January 6, 2000
Title: POLYCYSTIC KIDNEY DISEASE GENE HOMOLOGS REQUIRED FOR
MALE MATING BEHAVIOR IN NEMATODES AND ASSAYS BASED
THEREON

Art Unit: 1632
Examiner: P. Paras, Jr.
Conf. No. 3063

Mail Stop ISSUE FEE

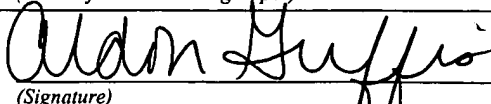
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL SHEET

Sir:

Transmitted herewith for the above-identified application, please find:

1. Response to Notice of Allowance mailed December 5, 2003 (1 page);
2. Form PTOL-85B Issue Fee Transmittal (*in duplicate*) (1 page);
3. Check No. 552744 in the amount of \$671.00; and
4. Return Receipt Postcard.

CERTIFICATION UNDER 37 CFR §1.8	
I hereby certify that the documents referred to as enclosed herein are being deposited with the United States Postal Service as first class mail on this date, January 27, 2004 , in an envelope addressed to: Mail Stop ISSUE FEE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
Aldon Griffis (Name of Person Mailing Paper)	
 (Signature)	January 27, 2004 (Date)

In re Application of:
Sternberg and Barr
Application No.: 09/479,467
Filed: January 6, 2000
Page 2

PATENT
Attorney Docket No.: CIT1520-1

Enclosed is Check No. 552744 in the total amount of \$671.00; which consists of \$665.00 for the Issue Fee and \$6.00 for the Advance Order Fee for Two (2) Patent Copies. The Commissioner is hereby authorized to charge any other fees that may be associated with this communication, or credit any overpayment to Deposit Account No. 50-1355. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Date: January 27, 2004



Lisa A. Haile, J.D., Ph.D.
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USPTO CUSTOMER NUMBER 28213
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4365 Executive Drive, Suite 1100
San Diego, California 92121-2133



PATENT
Attorney Docket No.: CIT1520-1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Sternberg and Barr
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RESPONSE TO NOTICE OF ALLOWANCE

Sir:

In response to the Notice of Allowance mailed December 5, 2003, enclosed are the completed Issue Fee Transmittal, Form PTOL-85B and Check No. 552744 in the amount of \$671.00 for the required Issue Fees and a request for Two (2) advance patent copies.

The Commissioner is hereby authorized to charge any other fees associated with the filing submitted herewith, or credit any overpayments, to Deposit Account No. 50-1355.

Respectfully submitted,

Date: January 27, 2004

Lisa A. Haile, J.D., Ph.D.
Registration No.: 38,347
Telephone: (858) 677-1456
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Aldon Griffis

(Name of Person Mailing Paper)

(Signature)

January 27, 2004

(Date)